

**ARIZONA CORPORATION COMMISSION**  
**UTILITIES DIVISION**

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY

W-03230A

Twin Hawks Utility, Inc.  
PO Box 70022  
Tucson, AZ 85737

RECEIVED

APR 26 2011

ACC UTILITIES DIRECTOR

**ANNUAL REPORT**  
**Water**

**FOR YEAR ENDING**

12	31	2010
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FOR COMMISSION USE

ANN 04	10
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4-26-11

**COMPANY INFORMATION**

<b>Company Name (Business Name)</b> <u>Twin Hawks Utility, Inc.</u>		
<b>Mailing Address</b> <u>P.O. Box 70022</u>		
	(Street)	
<u>Tucson</u>	<u>Arizona</u>	<u>85737</u>
(City)	(State)	(Zip)
<u>520-904-0741</u>	<u>520-297-9494</u>	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)
<b>Email Address</b> <u>cwh2ser@msn.com</u>		
<b>Local Office Mailing Address</b> <u>Same As Above</u>		
	(Street)	
	(City)	(State) (Zip)
<u>Local Office Telephone No. (Include Area Code)</u>	<u>Fax No. (Include Area Code)</u>	<u>Cell No. (Include Area Code)</u>
<b>Email Address</b> _____		

**MANAGEMENT INFORMATION**

<b>Management Contact:</b> <u>Christopher Hill</u>		<b>Manager</b>	
	(Name)		(Title)
<u>P.O. Box 70022</u>	<u>Tucson</u>	<u>AZ</u>	<u>85742</u>
(Street)	(City)	(State)	(Zip)
<u>520-904-0741</u>	<u>520-297-9494</u>	<u>520-904-0741</u>	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)	
<b>Email Address</b> <u>cwh2serv@msn.com</u>			
<b>On Site Manager:</b> <u>Same As Above</u>			
	(Name)		
	(Street)	(City)	(State) (Zip)
<u>Telephone No. (Include Area Code)</u>	<u>Fax No. (Include Area Code)</u>	<u>Cell No. (Include Area Code)</u>	
<b>Email Address</b> _____			

☐ Please mark this box if the above address(es) have changed or are updated since the last filing.

Statutory Agent: Christopher W. Hill  
(Name)

PO Box 70022 Tucson AZ 85737  
(Street) (City) (State) (Zip)

520-904-0741 520-297-9494 520-904-0741  
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Attorney: Snell and Wilmer  
(Name)

1 Church St Tucson AZ 85716  
(Street) (City) (State) (Zip)

Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

Email Address

Please mark this box if the above address(es) have changed or are updated since the last filing.

OWNERSHIP INFORMATION

Check the following box that applies to your company:

- ☐ Sole Proprietor (S)
- ☐ C Corporation (C) (Other than Association/Co-op)
- ☐ Partnership (P)
- ☒ Subchapter S Corporation (Z)
- ☐ Bankruptcy (B)
- ☐ Association/Co-op (A)
- ☐ Receivership (R)
- ☐ Limited Liability Company
- ☐ Other (Describe)

COUNTIES SERVED

Check the box below for the county/ies in which you are certificated to provide service:

- ☐ APACHE☐ COCHISE☐ COCONINO
- ☐ GILA☐ GRAHAM☐ GREENLEE
- ☐ LA PAZ☐ MARICOPA☐ MOHAVE
- ☐ NAVAJO☐ PIMA☒ PINAL
- ☐ SANTA CRUZ☐ YAVAPAI☐ YUMA
- ☐ STATEWIDE

UTILITY PLANT IN SERVICE

Acct. No.	DESCRIPTION	Original Cost (OC)	Accumulated Depreciation (AD)	O.C.L.D. (OC less AD)
301	Organization	18,600		18,600
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs	19,500	649	18,851
311	Pumping Equipment	4,202	525	3,677
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes	10,600	235	10,365
331	Transmission and Distribution Mains	20,221	404	19,817
333	Services	3,500	117	3,383
334	Meters and Meter Installations	1,000	83	917
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment	4,225	282	3,943
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	81,848	2,296	79,552

This amount goes on the Balance Sheet Acct. No. 108

**CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR**

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements			
307	Wells and Springs	19,500	3.33	649
311	Pumping Equipment	4,202	12.50	525
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes	10,600	2.22	235
331	Transmission and Distribution Mains	20,221	2.00	404
333	Services	3,500	3.33	117
334	Meters and Meter Installations	1,000	8.33	83
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment	4,225	6.67	282
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	<b>TOTALS</b>	81,848		2,296

This amount goes on the Comparative Statement of Income and Expense \_\_\_\_\_  
 Acct. No. 403.

BALANCE SHEET

Acct No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	ASSETS		
	CURRENT AND ACCRUED ASSETS		
131	Cash	5,530	5,951
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable	140	230
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS	\$5,670	\$6,181
	FIXED ASSETS		
101	Utility Plant in Service	79,379	81,848
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant	(6100)	(8396)
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$73,297	\$73,452
	TOTAL ASSETS	\$78,949	\$79,633

NOTE: The Assets on this page should be equal to **Total Liabilities and Capital** on the following page.

**BALANCE SHEET (CONTINUED)**

Acct. No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	<b>LIABILITIES</b>		
	<b>CURRENT LIABILITES</b>		
231	Accounts Payable		
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	<b>TOTAL CURRENT LIABILITIES</b>	\$0	\$0
	<b>LONG-TERM DEBT (Over 12 Months)</b>		
224	Long-Term Notes and Bonds		
	<b>DEFERRED CREDITS</b>		
251	Unamortized Premium on Debt		
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	<b>TOTAL DEFERRED CREDITS</b>	\$0	\$0
	<b>TOTAL LIABILITIES</b>	\$0	\$0
	<b>CAPITAL ACCOUNTS</b>		
201	Common Stock Issued		
211	Paid in Capital in Excess of Par Value		
215	Retained Earnings		
218	Member Equity		
	<b>TOTAL CAPITAL</b>	\$78,949	\$79,633
	<b>TOTAL LIABILITIES AND CAPITAL</b>	<b>\$78,949</b>	<b>\$79,633</b>

**COMPARATIVE STATEMENT OF INCOME AND EXPENSE**

<b>Acct. No.</b>	<b>OPERATING REVENUES</b>	<b>PRIOR YEAR</b>	<b>CURRENT YEAR</b>
461	Metered Water Revenue	6,397	7,359
460	Unmetered Water Revenue		
474	Other Water Revenues		
	<b>TOTAL REVENUES</b>	<b>\$6,397</b>	<b>\$7,359</b>
	<b>OPERATING EXPENSES</b>		
601	Personal Property Tax		
236.1	Taxes – TPT	428	540
615	Purchased Power	1100	1300
618	Water Quality Testing		
620	Repairs and Maintenance and Materials		
621	Office Supplies and Expense		
630	Outside Services	800	1000
635	Water Testing		
619	Chemicals		
622	Postage – PO Box Rental		
631	Professional Services		
632	Accounting		
633	Legal		
675	Miscellaneous Expense		
674	Repairs and Plant Maintenance		
403	Depreciation Expense	2000	2200
408.11	Property Taxes	280	303
409	Income Tax		
	<b>TOTAL OPERATING EXPENSES</b>	<b>4608</b>	<b>5343</b>
	<b>OPERATING INCOME/(LOSS)</b>	<b>1789</b>	<b>2016</b>
	<b>OTHER INCOME/(EXPENSE)</b>		
419	Interest and Dividend Income		
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses	300	1800
427	Interest Expense		
	<b>TOTAL OTHER INCOME/(EXPENSE)</b>		
	<b>NET INCOME/(LOSS)</b>	<b>\$1,489</b>	<b>\$216</b>



SUPPLEMENTAL FINANCIAL DATA

Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued				
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate	%	%	%	%
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

Meter Deposit Balance at Test Year End

Meter Deposits Refunded During the Test Year

COMPANY NAME Twin Hawks Utility, Inc.	2010
Name of System:	ADEQ Public Water System Number:

**WATER COMPANY PLANT DESCRIPTION**

**WELLS**

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
636404	5	25	725	8	1	

\* Arizona Department of Water Resources Identification Number

**OTHER WATER SOURCES**

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other
2	2		
5	1		

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity
10,000	1	300	2
10,000	1		

***Note: If you are filing for more than one system, please provide separate sheets for each system.***

**WATER COMPANY PLANT DESCRIPTION (CONTINUED)**

MAINS		
Size (in inches)	Material	Length (in feet)
2		
3		
4		
5		
6		
8		
10		
12		

CUSTOMER METERS	
Size (in inches)	Quantity
5/8 X 3/4	14
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

For the following three items, list the utility owned assets in each category for each system.

TREATMENT EQUIPMENT:


STRUCTURES:


OTHER:


*Note: If you are filing for more than one system, please provide separate sheets for each system.*

COMPANY NAME: <u>Twin Hawks Utility, Inc.</u>		2010
Name of System:		ADEQ Public Water System Number:

**WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2010**

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY				
FEBRUARY				
MARCH				
APRIL				
MAY				
JUNE				
JULY				
AUGUST				
SEPTEMBER				
OCTOBER				
NOVEMBER				
DECEMBER				
TOTALS →				0

What is the level of arsenic for each well on your system? .003 mg/l  
*(If more than one well, please list each separately.)*

If system has fire hydrants, what is the fire flow requirement? NA

If system has chlorination treatment, does this treatment system chlorinate continuously?  
( ) Yes                      ( X ) No

Is the Water Utility located in an ADWR Active Management Area (AMA)?  
( ) Yes                      ( X ) No

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?  
( ) Yes                      ( X ) No

If yes, provide the GPCPD amount: \_\_\_\_\_

***Note: If you are filing for more than one system, please provide separate data sheets for each system.***

COMPANY NAME: <u>Twin Hawks Utility, Inc.</u>		2010
Name of System:		ADEQ Public Water System Number:

**UTILITY SHUTOFFS / DISCONNECTS**

MONTH	Termination without Notice R14-2-410.B	Termination with Notice R14-2-410.C	OTHER
JANUARY	0	0	
FEBRUARY	0	0	
MARCH	0	0	
APRIL	0	0	
MAY	0	0	
JUNE	0	0	
JULY	0	0	
AUGUST	0	0	
SEPTEMBER	0	0	
OCTOBER	0	0	
NOVEMBER	0	0	
DECEMBER	0	0	
TOTALS →	0	0	

OTHER (description):

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**PROPERTY TAXES**

Amount of actual property taxes paid during Calendar Year 2010 was: \$ \_\_\_\_\_ **303** \_\_\_\_\_

Attach to this annual report proof (e.g. property tax bills stamped “paid in full” or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**VERIFICATION  
AND  
SWORN STATEMENT**  
Taxes

RECEIVED

APR 11 2011

ACCUTILITIES DIRECTOR

**VERIFICATION**

STATE OF ARIZONA

I, THE UNDERSIGNED  
OF THE

COUNTY OF (COUNTY NAME)	<u>PINAL</u>
NAME (OWNER OR OFFICIAL) TITLE	<u>CHRISTOPHER W. RILL</u>
COMPANY NAME	<u>TEW HAWKS UTILITY, INC.</u>

**DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION**

**FOR THE YEAR ENDING**

MONTH	DAY	YEAR
<u>12</u>	<u>31</u>	<u>2010</u>

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

**SWORN STATEMENT**

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

*Chris Rill*

SIGNATURE OF OWNER OR OFFICIAL

520-904-0741

TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

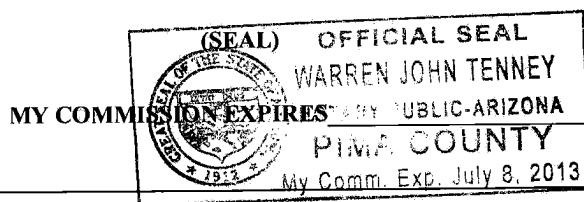
A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

14

DAY OF

COUNTY NAME	<u>Pinal</u>	
MONTH	<u>Apr. 1</u>	<u>2011</u>



*Warren John Tenney*  
SIGNATURE OF NOTARY PUBLIC

**COMPANY NAME**\_\_ Twin Hawks Utility, Inc.\_\_\_\_ **YEAR ENDING 12/31/2010**

**INCOME TAXES**

For this reporting period, provide the following:

Federal Taxable Income Reported \_\_\_\_\_  
Estimated or Actual Federal Tax Liability \_\_\_\_\_

State Taxable Income Reported \_\_\_\_\_  
Estimated or Actual State Tax Liability \_\_\_\_\_

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances \_\_\_\_\_  
Amount of Gross-Up Tax Collected \_\_\_\_\_  
Total Grossed-Up Contributions/Advances \_\_\_\_\_

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

**CERTIFICATION**

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year’s annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

_____ <b>SIGNATURE</b>	_____ <b>DATE</b>
_____ <b>PRINTED NAME</b>	_____ <b>TITLE</b>



**VERIFICATION  
AND  
SWORN STATEMENT  
Intrastate Revenues Only**

RECEIVED  
9/28/11  
ACC UTILITIES DIRECTOR

**VERIFICATION**

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME)	<u>Pima</u>
NAME (OWNER OR OFFICIAL) TITLE	<u>CHRISTOPHER W. HILL</u>
COMPANY NAME	<u>Twins Hawks Utility, Inc</u>

**DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION**

**FOR THE YEAR ENDING**

MONTH	DAY	YEAR
<u>12</u>	<u>31</u>	<u>2010</u>

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

**SWORN STATEMENT**

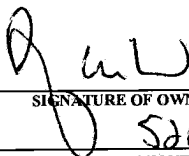
IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2010 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

\$ 7,903

(THE AMOUNT IN BOX ABOVE  
INCLUDES \$ 540  
IN SALES TAXES BILLED, OR COLLECTED)

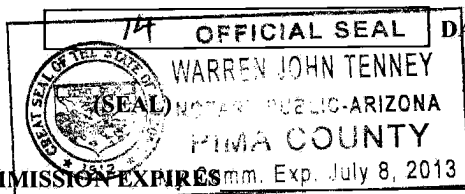
**\*\*REVENUE REPORTED ON THIS PAGE MUST  
INCLUDE SALES TAXES BILLED OR  
COLLECTED. IF FOR ANY OTHER REASON,  
THE REVENUE REPORTED ABOVE DOES NOT  
AGREE WITH TOTAL OPERATING REVENUES  
ELSEWHERE REPORTED, ATTACH THOSE  
STATEMENTS THAT RECONCILE THE  
DIFFERENCE. (EXPLAIN IN DETAIL)**

  
SIGNATURE OF OWNER OR OFFICIAL  
520-904-0741  
TELEPHONE NUMBER

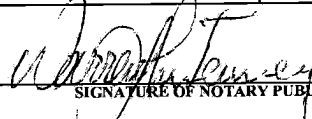
SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 14 OFFICIAL SEAL DAY OF



COUNTY NAME	<u>Pima</u>	
MONTH	<u>April</u>	<u>2011</u>

  
SIGNATURE OF NOTARY PUBLIC

**VERIFICATION  
AND  
SWORN STATEMENT  
RESIDENTIAL REVENUE  
Intrastate Revenues Only**

RECEIVED  
APR 18 2011  
ACC UTILITIES DIRECTOR

**VERIFICATION**

**STATE OF ARIZONA**

**I, THE UNDERSIGNED**

**OF THE**

COUNTY OF (COUNTY NAME) <u>PINAL</u>	
NAME (OWNER OR OFFICIAL) <u>CHRISTOPHER W. AILL</u>	TITLE <u>President</u>
COMPANY NAME <u>Twin Hawks Utility, INC.</u>	

**DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION  
FOR THE YEAR ENDING**

MONTH	DAY	YEAR
12	31	2010

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

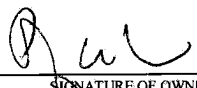
**SWORN STATEMENT**

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2010 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES  \$ <u>7,903</u>
--

THE AMOUNT IN BOX AT LEFT  
INCLUDES \$ \$540  
IN SALES TAXES BILLED, OR COLLECTED)

**\*RESIDENTIAL REVENUE REPORTED ON THIS PAGE  
MUST INCLUDE SALES TAXES BILLED.**

  
SIGNATURE OF OWNER OR OFFICIAL  
530-204-0741  
TELEPHONE NUMBER

**SUBSCRIBED AND SWORN TO BEFORE ME**

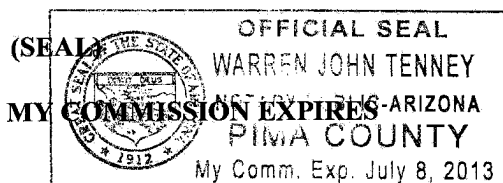
**A NOTARY PUBLIC IN AND FOR THE COUNTY OF**

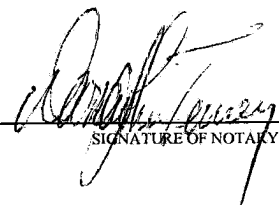
**THIS**

14
----

**DAY OF**

NOTARY PUBLIC NAME <u>Warren John Tenney</u>	
COUNTY NAME <u>Pima</u>	
MONTH <u>April</u>	20 <u>11</u>



X   
SIGNATURE OF NOTARY PUBLIC